

FILED

June 22, 2007

**NEW JERSEY STATE BOARD
OF MEDICAL EXAMINERS**

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF MEDICAL EXAMINERS

IN THE MATTER OF THE LICENSE OF

LOKESH BABU VUYYURU, M.D.
License No. MA54880

TO PRACTICE MEDICINE AND SURGERY
IN THE STATE OF NEW JERSEY

Administrative Action

FINAL ORDER
OF DISCIPLINE

This matter was opened to the New Jersey State Board of Medical Examiners upon receipt of information which the Board has reviewed and on which the following findings of fact and conclusions of law are made;

FINDINGS OF FACT

1. Respondent, Lokesh Vuyyuru, M.D., is the holder of License No. MA54880 and was licensed to practice medicine in the State of New Jersey from 1990 to 1991, after which time Respondent permitted that license to lapse.
2. On or about May 19, 2006, the Virginia Board of Medicine ("Virginia Board") entered an Order revoking Respondent's license to practice medicine for engaging in professional misconduct. The Virginia Board found that Respondent violated §54.2915.A(3), (13), (16), (17), and (18) of the Code, as well as 54.1-3404 and 54.1-3405 of the Code. The Virginia Board also found that

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Respondent violated the following Regulations Governing the Practice of Medicine: 18 VAC 85-20-330(B)(2) and (C)(2); 18 VAC 85-20-340(A) and (B); 18 VAC 85-20-360(A) and (D); 18 VAC 85-20-370; 18 VAC 85-20-380; and 18 VAC 85-20-105. Specifically, the Virginia Board found that the death of Patient A was the result of Respondent's failure to act within the standard of care and that the complications Patient A experienced were the result of Respondent's decision for prolonged and unnecessary intubation. The Virginia Board found that the record did not support the need for additional administration of Versed and Demerol during Patient B's, endoscopic retrograde cholangiopancreatography ("ERCP") and that Respondent did not ensure that Patient B was adequately monitored during the procedure. Patient B suffered hypoxia, developed anoxic encephalopathy, and was discharged in a vegetative state. The Virginia Board further found that Respondent's treatment of Patient D, 104 year old female, who suffered a cardiac arrest and died following a ERCP procedure was contrary to sound medical judgment and a violation of the applicable standard of care. The Board determined that Respondent performed the risky diagnostic procedure without considering Patient D's age and ignoring relative contradictions such as renal failure, atrial fibrillation, right heart failure and advanced malignancy. Additionally, the Virginia Board determined that Respondent's treatment of Patients E, I and K demonstrated a pattern of faulty clinical judgment with respect to ERCPs, in that Respondent

performed the procedure on Patients E and I contrary to sound medical judgment, and recommended that Patient K undergo the procedure contrary to sound medical judgment. The Virginia Board also found that Respondent did not have the required written protocols, policies, and procedures for physicians who administer office-based anesthesia, Respondent's medical records of controlled substances failed to satisfy statutory requirements and that Respondent refused to immediately supply copies of requested records during the investigation of his practice.

CONCLUSION OF LAW

1. The above disciplinary action taken by the sister state of Virginia provides grounds to take disciplinary action against Respondent's license to practice medicine and surgery in New Jersey pursuant to N.J.S.A. 45:1-21(g), in that Respondent's license to practice medicine is revoked in another state.

2. The above disciplinary action taken by the sister state of Virginia provides grounds to take disciplinary action against Respondent's license to practice medicine and surgery in New Jersey pursuant to N.J.S.A. 45:1-21(d), in that Respondent has engaged in repeated acts of negligence.

3. The above disciplinary action taken by the sister state of Virginia provides grounds to take disciplinary action against Respondent's license to practice medicine and surgery in New Jersey

pursuant to N.J.S.A. 45:1-21(e), in that Respondent has engaged in professional misconduct.

4. The above disciplinary action taken by the sister state of Virginia provides grounds to take disciplinary action against Respondent's license to practice medicine and surgery in New Jersey pursuant to N.J.S.A. 45:1-21(h), in that Respondent has failed to comply with regulation N.J.A.C. 13:35-6.5.

5. Respondent's failure to submit his biennial renewal in 1991 resulting in a lapsed license status provides grounds to automatically suspend Respondent's license to practice medicine and surgery in the State of New Jersey pursuant to N.J.S.A.

DISCUSSION ON FINALIZATION

Based on the foregoing findings and conclusions, a Provisional Order of Discipline ("POD") was entered by this Board on August 17, 2006 and served upon Respondent. The POD was subject to finalization by the Board at 5:00 p.m. on the 30th business day following entry unless Respondent requested a modification or dismissal of the stated Findings of Fact or Conclusions of Law by submitting a written request for modification or dismissal setting forth in writing any and all reasons why said findings and conclusions should be modified or dismissed and submitting any and all documents or other written evidence supporting Respondent's request for consideration and reasons therefor.

Respondent submitted a response dated September 26, 2006 requesting a modification to the Findings of Fact, Conclusions of Law and proposed penalty. Thereafter, the Attorney General filed a reply dated April 23, 2007. Respondent disputes the underlying findings of facts and conclusions of law set forth and relied upon in the Order entered, after a hearing, by the Virginia Board on May 19, 2006. Respondent also questions the credibility and expertise of the witnesses and professionals involved in the Virginia Board's hearing process. Finally, respondent argues that the Board of Medical Examiners lacks jurisdiction to take disciplinary action against him because his license to practice medicine has been suspended by operation of law for his failure to timely renew pursuant to N.J.S.A.45:1-7.1.

The submissions of Respondent and Attorney General were reviewed by the Board and the Board determined that further proceedings were unnecessary and that no material discrepancies have been raised. The Provisional Order of Discipline alleges the fact of the Virginia State Board action which Respondent cannot contest. This Board is not in a position to relitigate that matter. Furthermore as a holder of a license to practice medicine and surgery in New Jersey, albeit in suspended status, the Respondent could at any time make application for reinstatement of the license pursuant to N.J.S.A. 45:1-7.2. Therefore, the Board does have jurisdiction in this matter. The Board was persuaded by the Attorney General's submission, but unpersuaded by the Respondent's arguments and, therefore, rejects Respondent's

proposed modifications to the Findings of Fact, Conclusions of Law
and proposed penalties.

ACCORDINGLY, IT IS on this 22nd day of June, 2007,

ORDERED THAT Respondent's license to practice medicine and surgery
in the State of New Jersey shall be, and hereby is, revoked.

NEW JERSEY STATE BOARD OF
MEDICAL EXAMINERS

Sindy M. Paul, MD, MBA

By:

Sindy Paul, M.D.
Board President

**DIRECTIVES APPLICABLE TO ANY MEDICAL BOARD LICENSEE
WHO IS DISCIPLINED OR WHOSE SURRENDER OF LICENSURE
HAS BEEN ACCEPTED**

APPROVED BY THE BOARD ON MAY 10, 2000

All licensees who are the subject of a disciplinary order of the Board are required to provide the information required on the Addendum to these Directives. The information provided will be maintained separately and will not be part of the public document filed with the Board. Failure to provide the information required may result in further disciplinary action for failing to cooperate with the Board, as required by N.J.A.C. 13:45C-1 et seq. Paragraphs 1 through 4 below shall apply when a license is suspended or revoked or permanently surrendered, with or without prejudice. Paragraph 5 applies to licensees who are the subject of an order which, while permitting continued practice, contains a probation or monitoring requirement.

1. Document Return and Agency Notification

The licensee shall promptly forward to the Board office at Post Office Box 183, 140 East Front Street, 2nd floor, Trenton, New Jersey 08625-0183, the original license, current biennial registration and, if applicable, the original CDS registration. In addition, if the licensee holds a Drug Enforcement Agency (DEA) registration, he or she shall promptly advise the DEA of the licensure action. (With respect to suspensions of a finite term, at the conclusion of the term, the licensee may contact the Board office for the return of the documents previously surrendered to the Board. In addition, at the conclusion of the term, the licensee should contact the DEA to advise of the resumption of practice and to ascertain the impact of that change upon his/her DEA registration.)

2. Practice Cessation

The licensee shall cease and desist from engaging in the practice of medicine in this State. This prohibition not only bars a licensee from rendering professional services, but also from providing an opinion as to professional practice or its application, or representing him/herself as being eligible to practice. (Although the licensee need not affirmatively advise patients or others of the revocation, suspension or surrender, the licensee must truthfully disclose his/her licensure status in response to inquiry.) The disciplined licensee is also prohibited from occupying, sharing or using office space in which another licensee provides health care services. The disciplined licensee may contract for, accept payment from another licensee for or rent at fair market value office premises and/or equipment. In no case may the disciplined licensee authorize, allow or condone the use of his/her provider number by any health care practice or any other licensee or health care provider. (In situations where the licensee has been suspended for less than one year, the licensee may accept payment from another professional who is using his/her office during the period that the licensee is suspended, for the payment of salaries for office staff employed at the time of the Board action.)

A licensee whose license has been revoked, suspended for one (1) year or more or permanently surrendered must remove signs and take affirmative action to stop advertisements by which his/her eligibility to practice is represented. The licensee must also take steps to remove his/her name from professional listings, telephone directories, professional stationery, or billings. If the licensee's name is utilized in a group practice title, it shall be deleted. Prescription pads bearing the licensee's name shall be destroyed. A destruction report form obtained from the Office of Drug Control (973-504-6558) must be filed. If no other licensee is providing services at the location, all medications must be removed and returned to the manufacturer, if possible, destroyed or safeguarded. (In situations where a license has been suspended for less than one year, prescription pads and medications need not be destroyed but must be secured in a locked place for safekeeping.)

3. Practice Income Prohibitions/Divestiture of Equity Interest in Professional Service Corporations and Limited Liability Companies

A licensee shall not charge, receive or share in any fee for professional services rendered by him/herself or others while barred from engaging in the professional practice. The licensee may be compensated for the reasonable value of services lawfully rendered and disbursements incurred on a patient's behalf prior to the effective date of the Board action.

A licensee who is a shareholder in a professional service corporation organized to engage in the professional practice, whose license is revoked, surrendered or suspended for a term of one (1) year or more shall be deemed to be disqualified from the practice within the meaning of the Professional Service Corporation Act. (N.J.S.A. 14A:17-11). A disqualified licensee shall divest him/herself of all financial interest in the professional service corporation pursuant to N.J.S.A. 14A:17-13(c). A licensee who is a member of a limited liability company organized pursuant to N.J.S.A. 42:1-44, shall divest him/herself of all financial interest. Such divestiture shall occur within 90 days following the the entry of the Order rendering the licensee disqualified to participate in the applicable form of ownership. Upon divestiture, a licensee shall forward to the Board a copy of documentation forwarded to the Secretary of State, Commercial Reporting Division, demonstrating that the interest has been terminated. If the licensee is the sole shareholder in a professional service corporation, the corporation must be dissolved within 90 days of the licensee's disqualification.

4. Medical Records

If, as a result of the Board's action, a practice is closed or transferred to another location, the licensee shall ensure that during the three (3) month period following the effective date of the disciplinary order, a message will be delivered to patients calling the former office premises, advising where records may be obtained. The message should inform patients of the names and telephone numbers of the licensee (or his/her attorney) assuming custody of the records. The same information shall also be disseminated by means of a notice to be published at least once per month for three (3) months in a newspaper of

general circulation in the geographic vicinity in which the practice was conducted. At the end of the three month period, the licensee shall file with the Board the name and telephone number of the contact person who will have access to medical records of former patients. Any change in that individual or his/her telephone number shall be promptly reported to the Board. When a patient or his/her representative requests a copy of his/her medical record or asks that record be forwarded to another health care provider, the licensee shall promptly provide the record without charge to the patient.

5. Probation/Monitoring Conditions

With respect to any licensee who is the subject of any Order imposing a probation or monitoring requirement or a stay of an active suspension, in whole or in part, which is conditioned upon compliance with a probation or monitoring requirement, the licensee shall fully cooperate with the Board and its designated representatives, including the Enforcement Bureau of the Division of Consumer Affairs, in ongoing monitoring of the licensee's status and practice. Such monitoring shall be at the expense of the disciplined practitioner.

(a) Monitoring of practice conditions may include, but is not limited to, inspection of the professional premises and equipment, and inspection and copying of patient records (confidentiality of patient identity shall be protected by the Board) to verify compliance with the Board Order and accepted standards of practice.

(b) Monitoring of status conditions for an impaired practitioner may include, but is not limited to, practitioner cooperation in providing releases permitting unrestricted access to records and other information to the extent permitted by law from any treatment facility, other treating practitioner, support group or other individual/facility involved in the education, treatment, monitoring or oversight of the practitioner, or maintained by a rehabilitation program for impaired practitioners. If bodily substance monitoring has been ordered, the practitioner shall fully cooperate by responding to a demand for breath, blood, urine or other sample in a timely manner and providing the designated sample.

NAME: Lokesh B. Vuyyuru, M.D.
NJ License # MA054880

ADDENDUM

Any licensee who is the subject of an order of the Board suspending, revoking or otherwise conditioning the license, shall provide the following information at the time that the order is signed, if it is entered by consent, or immediately after service of a fully executed order entered after a hearing. The information required here is necessary for the Board to fulfill its reporting obligations:

Social Security Number¹: _____

List the Name and Address of any and all Health Care Facilities with which you are affiliated:

List the Names and Address of any and all Health Maintenance Organizations with which you are affiliated:

Provide the names and addresses of every person with whom you are associated in your professional practice: (You may attach a blank sheet of stationery bearing this information).

¹ Pursuant to 45 CFR Subtitle A Section 61.7 and 45 CFR Subtitle A Section 60.8, the Board is required to obtain your Social Security Number and/or federal taxpayer identification number in order to discharge its responsibility to report adverse actions to the National Practitioner Data Bank and the HIP Data Bank.

**NOTICE OF REPORTING PRACTICES OF BOARD
REGARDING DISCIPLINARY ACTIONS**

Pursuant to N.J.S.A. 52:14B-3(3), all orders of the New Jersey State Board of Medical Examiners are available for public inspection. Should any inquiry be made concerning the status of a licensee, the inquirer will be informed of the existence of the order and a copy will be provided if requested. All evidentiary hearings, proceedings on motions or other applications which are conducted as public hearings and the record, including the transcript and documents marked in evidence, are available for public inspection, upon request.

Pursuant to 45 CFR Subtitle A 60.8, the Board is obligated to report to the National Practitioners Data Bank any action relating to a physician which is based on reasons relating to professional competence or professional conduct:

- (1) Which revokes or suspends (or otherwise restricts) a license,
- (2) Which censures, reprimands or places on probation,
- (3) Under which a license is surrendered.

Pursuant to 45 CFR Section 61.7, the Board is obligated to report to the Healthcare Integrity and Protection (HIP) Data Bank, any formal or official actions, such as revocation or suspension of a license (and the length of any such suspension), reprimand, censure or probation or any other loss of license or the right to apply for, or renew, a license of the provider, supplier, or practitioner, whether by operation of law, voluntary surrender, non-renewability, or otherwise, or any other negative action or finding by such Federal or State agency that is publicly available information.

Pursuant to N.J.S.A. 45:9-19.13, if the Board refuses to issue, suspends, revokes or otherwise places conditions on a license or permit, it is obligated to notify each licensed health care facility and health maintenance organization with which a licensee is affiliated and every other board licensee in this state with whom he or she is directly associated in private medical practice.

In accordance with an agreement with the Federation of State Medical Boards of the United States, a list of all disciplinary orders are provided to that organization on a monthly basis.

Within the month following entry of an order, a summary of the order will appear on the public agenda for the next monthly Board meeting and is forwarded to those members of the public requesting a copy. In addition, the same summary will appear in the minutes of that Board meeting, which are also made available to those requesting a copy.

Within the month following entry of an order, a summary of the order will appear in a Monthly Disciplinary Action Listing which is made available to those members of the public requesting a copy.

On a periodic basis the Board disseminates to its licensees a newsletter which includes a brief description of all of the orders entered by the Board.

From time to time, the Press Office of the Division of Consumer Affairs may issue releases including the summaries of the content of public orders.

Nothing herein is intended in any way to limit the Board, the Division or the Attorney General from disclosing any public document.